



Facility: _____ _____ _____		U. S. Coast Guard Marine Safety Unit Lake Charles 125 West Broad St., Suite 200 Lake Charles, LA 70601		Phone: (337) 491-7800 Fax: (337) 491-7840		
Date of Inspection:		FIN:		Case#:		
Annual Exam		Spot Check		Followup		
Requirements as per 33 CFR 126			Yes	No	Cor	N/A
Facility of Particular Hazard?		.10				
Guards provided to assure adequate surveillance		.15(a)				
Smoking prohibited except in areas provided		.15(b)				
No welding or hotwork during handling of dangerous cargo		.15(c)				
Trucks or motor vehicles not parked on facility		.15(d)				
Pier automotive equipment - condition		.15(e)				
Facility free of waste and rubbish material		.15(f)				
Maintenance stores and supplies - storage		.15(g)				
Electric wiring - installation		.15(h)				
Heating equipment and open fires		.15(i)				
Fire extinguishing equipment - availability		.15(j)				
Marking of fire appliance locations		.15(k)				
Lighting - adequate		.15(l)				
Arrangement of cargo, freight, merchandise, or material		.15(m)				
Adequacy of guarding, fire extinguishing equipment, and lighting		.15(n)				
Discrepancy Description/Remarks:          						
<b>ALL NOTED DISCREPANCIES ARE TO BE CORRECTED:</b>  <input type="checkbox"/> By the specified date: _____ <input type="checkbox"/> Prior to next transfer operation <input type="checkbox"/> Within 30 days of inspection <input type="checkbox"/> Within 60 days of inspection		<b>USCG Inspector</b>		Date:		
		<b>Facility Owner/Operator</b>		Date:		